Docket No.: 129026

## DECLARATION AND POWER OF ATTORNEY UNDER 35 USC §371(c)(4) FOR PCT APPLICATION FOR UNITED STATES PATENT

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated below under my name;

I verily believe I am the orig	inal, first and sole inventor (if only one name is listed below) or an original, first
and joint inventor (if plural names are	e listed below) of the subject matter which is claimed and for which a patent is
sought, namely the invention entitled:	ALKALINE STORAGE BATTERY

described and claimed in international application number PCT/JP2005/006535 filed on 28/Mar./2005

I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations §1.56.

Under Title 35, U.S. Code §119, the priority benefits of the following foreign application(s) filed by me or my legal representatives or assigns within one year prior to my international application are hereby claimed:

2004-096655 filed in Japan on 29/Mar./2004

The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to my international application, or (b) before the filing date of the above-named foreign priority application(s):

As a named inventor, I hereby appoint the patent practitioners associated with Oliff & Berridge, PLC Customer No. 25944 as attorneys of record to prosecute this application and all continuations and divisions thereof, and to transact all business in the Patent and Trademark Office.

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, PLC, CUSTOMER NO. 25944. TELEPHONE: (703) 836-6400.

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

1	Typewritten Fi of Sole or First	_	Hideki			ANDO		
2	2 Inventor's Signature:		Given Name Hideki	Middle And	Initial	Family Name		
3 Date of Signs		ure:	april	19,	2006			
	-		Month	Day		Year		
	Residence:	Toyoha	shi-shi	Aichi-ken		Japan		
	Citizenship:	Japane:	City se	State or Pr	ovince	Country		
	Post Office Address:		c/o PA	NASONIC I	EV ENERG	Y CO., LTD.		
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Note to Inventor: Please sign name on line 2 exactly as it appears in line 1 and insert the actual date of signing on line 3.

Typewritten Full Name								
of Joint Inventor				SAKAMOTO				
Inventor's Signature:					Family Name			
Date of Signature:		april	19	2006				
		Month			Year			
Residence:					Japan			
Citizenship:	Ci Japanese			Tovince	Country			
Post Office	Address:	s: c/o PANASOI		ERGY CO.	, LTD.			
(Insert complete mailing address, including country)			1					
Typewritten Full Name of Joint Inventor								
	. (	Given Name	Middle	Initial	Family Name			
Inventor's Signature:	·							
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Post Office Address: (Insert complete mailing address, including country)								
Typewritten Full Name of Joint Inventor								
Inventor's Signature:		Given Name	Middle Initial		Family Name (			
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(Insert complete mailing address, including country)								
	Inventor's Signature:  Date of Signature:  Residence:  Citizenship:  Post Office (Insert com address, inc.)  Typewritten Full Name of Joint Inventor  Inventor's Signature:  Residence:  Citizenship:  Post Office (Insert com address, in  Typewritten Full Name of Joint Inventor  Inventor's Signature:  Post Office (Insert com address, in  Typewritten Full Name of Joint Inventor  Inventor's Signature:  Date of Signature:  Residence:  Citizenship:  Post Office (Insert com	Inventor's Signature:  Residence: Toyohash: Citizenship: Japanese  Post Office Address: (Insert complete mailing address, including country)  Typewritten Full Name of Joint Inventor  Inventor's Signature:  Residence: Citizenship:  Post Office Address: (Insert complete mailing address, including country)  Typewritten Full Name of Joint Inventor  Inventor's Signature:  Post Office Address: (Insert complete mailing address, including country)  Typewritten Full Name of Joint Inventor  Inventor's Signature:  Date of Signature:  Residence:  Citizenship:  Post Office Address: (Insert complete mailing	Inventor's Signature:  Date of Signature:  Post Office Address: (Insert complete mailing address Signature:  Date of Signature:  Post Office Address: (Insert complete mailing address, including country)  Typewritten Full Name of Joint Inventor  Residence:  City  Citizenship:  Post Office Address: (Insert complete mailing address, including country)  Typewritten Full Name  of Joint Inventor  City  Citizenship:  Post Office Address: (Insert complete mailing address, including country)  Typewritten Full Name  of Joint Inventor  Inventor's Signature:  Date of Signature:  Month  Residence:  City  Citizenship:  Post Office Address: (Insert complete mailing address)  Inventor's Signature:  Date of Signature:  Date of Signature:  Post Office Address: (Insert complete mailing address)  City  Citizenship:  Post Office Address: (Insert complete mailing ad	of Joint Inventor  Inventor's Signature:  Date of Signature:  Post Office Address: (Insert complete mailing address; including country)  Typewritten Full Name of Joint Inventor  Residence:  Post Office Address: (Insert complete mailing address; including country)  Typewritten Full Name of Joint Inventor  City State or Fore Name  Month  Display of Signature:  Date of Signature:  Post Office Address: (Insert complete mailing address, including country)  Typewritten Full Name of Joint Inventor  Given Name  Month  Display of Signature:  City State or Fore Name  Middle  Inventor's Signature:  Post Office Address: (Insert complete mailing address, including country)  Typewritten Full Name of Joint Inventor  Given Name  Middle  Inventor's Signature:  Month  Display of Signature:  City State or Fore Name  Middle  Inventor's Signature:  City State or Fore Name  Middle  Inventor's Signature:  City State or Fore Name  Middle  Inventor's Signature:  Date of Signature:  Month  Display of Signature  City State or Fore Name  Middle  Inventor's Signature:  Date of Signature:  Month  Display of Signature  City State or Fore Name  Middle  Inventor's Signature:  Date of Signature:  Month  Display of Signature  Month  Display of Signature  City State or Fore Name	Inventor's Signature:   Given Name   Middle Initial			

Note to Inventor: Please sign name on line 2 exactly as it appears in line 1 and insert the actual date of signing on line 3.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney of the application to which it pertains.